BEST AVAILABLE COPY

application or Docket Number

	PATENT	APPLICATION Effect	RD	ĺ	58/		394	17	•				
ΓŦ	OTAL CLAIMS	CLAIMS A	S FILED (Colum		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY		N TY
								RATE	FEE		RATE	.~cE	Ε
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FE	E	OR	BASIC FEE	86	 5 C
TOTAL CHARGEABLE CLAIMS			33 minus 20=		13			X\$ 9=		OR	X\$18=	23	
⇤	DEPENDENT C		, minus 3 =		•			X40=	<u> </u>	1	X80=	-	
M	JLTIPLE DEPE	NDENT CLAIM P	RESENT	·,				405	 	OR		ļ	
* If the difference in column 1 is less than zero, enter "0" in column 2							L	+135=		OR	+270=		
	CLAIMS AS AMENDED - PART II							TOTAL	<u> </u>	OR	TOTAL	109	
Γ.		(Column 1)		(Colur	nn 2)	(Column 3)	5	MALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADI TION FE	NAL
	Total	.33	Minus	/	0	= <i>Q</i>		X\$ 9=		OR	X\$18=		
	Independent FIRST PRESE	ENTATION OF MI	Minus JLTIPLE DE	PENDENT	CLAIM	= 0		X40=		OR	X80=		
							L	135=		OR	+270=		
		-					ADI	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE		<u>x</u>
		(Column 1)	STANDS AND ADDRESS OF	(Colun		(Column 3)							·,
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO	BER JUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADD TION FEI	IÄL
	Total	*	Minus	**		=	>	(\$ 9=		OR	X\$18=		
	Independent	NITATION OF MI	Minus	***		=	7	X40=		OR	X80=		
,	I INST PRESE	NTATION OF MU	LIPLE DEI			135=		l	070		•		
										OR	+270= TOTAL		_
		(Column 1)		(0 - 1,	O\	(0.1 0)	ADD	TOTAL DIT. FEE		OR A	DDIT. FEE		
ပ		CLAIMS		(Colum	ST	(Column 3)	_		4001				
AMENDMENT		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	USLY	PRESENT EXTRA	Я	ATE	ADDI- TIONAL FEE		RATE	ADD TION FEE	AL
	Total		Minus	••		=	X	\$ 9=		OR	X\$18=		
	Independent		Minus	***		=	X	 (40≃		ŀ	X80=		
	FINOI PRESE	NTATION OF MU	LTIPLE DEF	PENDENT	CLAIM		-			OR			_
• 11	the entry in colur	nn 1 is less than the	e entry in colu	mn 2, write	"0" in col	umn 3.		135=		OR	+270=		
••••	rtne "Hignest Nur I th: "Highest Nu	nber Previously Pai nber Previously Pa	id For" IN THI: id For" IN THI:	S SPACE is S SPACE is	less than	20, enter "20."	ADD	IT. FEE			TOTAL DDIT. FEE		
1	n Highest Num	ber Previously Paid	IF で (Total or	Independe	nt) is the	highest number	found la	n the app	propriate box	in colu	mn 1.		